FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

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OMB APPROVAL	
OMB Number: 3235-00	76
Expires:	
Estimated average burden	
hours per response16	.00
SEC USE ONLY	

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Name of Offering (check if this is an amended ADEX MINING INC	ment and name has changed, and indicate change.)	
	ule 504 Rule 505 Rule 506 Section 4(6)	CCENEN (S)
	A. BASIC IDENTIFICATION DATA	12/1/20
1. Enter the information requested about the issu	er	图 <00> 1
Name of Issuer (check if this is an amendmen Adex Mining Inc.	t and name has changed, and indicate change.)	186 SECTION
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
372 Bay Street, Suite 801, Toronto, Ontario I	M5H 2W9 Canada	(416)316-3003 (416) 941-9663
Address of Principal Business Operations (if different from Executive Offices)	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
	PROCESSED	
Brief Description of Business	110020000	
Mining Exploration	JUL 0 2 2007 🗲	
	ed partnership, already forme THOMSON other (i kadur dala kadu dala akka dala dala akka dala akila dala akka dala akila dala akila dala dala dala dala dala
	Month Year ization: 112 912 Actual Estiver two-letter U.S. Postal Service abbreviation for State N for Canada; FN for other foreign jurisdiction)	07069239 mated c:

GENERAL INSTRUCTIONS

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

- Attention –

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

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2. Enter the information i	equested for the fo	llowing	2:							
 Each promoter of 	the issuer, if the is	suer ha	is been organized w	ithin 1	the past five year	rs:				
 Each beneficial or 	vner having the pov	ver to v	ote or dispose, or dir	ect th	e vote or disposit	ion of,	10% or 1	nore of a	clas	s of equity securities of the issuer.
Each executive of	ficer and director o	f corpo	orate issuers and of	согро	rate general and	manag	ing partr	ers of p	artne	rship issuers; and
 Each general and 	managing partner o	of partn	ership issuers.							
Check Box(es) that Apply:	Promoter		Beneficial Owner	Ø	Executive Office	er [/ Dire	ctor		General and/or Managing Partner
Full Name (Last name first. Ahmed, Kabir	if (ndividual)									
Business or Residence Addr 372 Bay Street, Suite 80	•		•	de)						
Check Box(es) that Apply:	Promoter		Beneficial Owner	¥	Executive Office	er [Dire	ctor		General and/or Managing Partner
FARR, ERRO Full Name (Last name first,	if individual)									
Business or Residence Addre										
372 Bay Street Check Box(es) that Apply:	et, suite	201	lako wto , c	<u>אעכ</u>	ARIO, MS	<u>H</u>	N4	CA	<u>~</u>	ν π
Check Box(es) that Apply:	Promoter		Beneficial Owner	المطا	Executive Office	er [Dire	ctor	Ц	General and/or Managing Partner
Full Name (Last name first.	•					-				
BURTON, WI Business or Residence Address	LL C.									
372 Bay S	ess (Number and treet. Sui	Street,	City, State, Zip Co 801 , Toloo	de) مئ ا (ا	DIONTA A	210.	HSF	+ 20	w9	CANADA
372 Bay Street Box(es) that Apply:	Promoter		Beneficial Owner		Executive Office	er [Dire	ctor		General and/or Managing Partner
Full Name (Last name first,	if individual)								,	
MARSHALL, Business or Residence Addre	ALAN	,								
372 Bay 5 Check Box(es) that Apply:	treet, Su	<u>k</u> 8	30/, 70Rox	<u>10</u>	, ONTAR	10 ,	M51	+ 2	<u>ب</u>	7 CANADA
Check Box(es) that Apply:	Promoter		Beneficial Owner		Executive Offic	er []/Dire	ctor		General and/or Managing Partner
Full Name (Last name first,	if individual)									
BURTON, W. Business or Residence Addre	ILLIAM	B.	• <u> </u>							
372 Bay St	′		,	770		,			9	CANADA
Check Box(es) that Apply:	Promoter	<u></u> П	Beneficial Owner	LJ	Executive Offic	er [] Dire	ctor	Ш	General and/or Managing Partner
Full Name (Last name first, i	f individual)									
Business or Residence Addre	ss (Number and	Street,	City, State, Zip Co	de)						
Check Box(es) that Apply:	Promoter	<u></u>	Beneficial Owner		Executive Offic	ст [Dire	ctor		General and/or Managing Partner
Full Name (Last name first, i	f individual)									
Business or Residence Addre	ss (Number and	Street,	City, State, Zip Coo	de)						

				B. Selvi	NFORMAT	ION ABO	T OFFER	NG) is				
1. Has th	c issuer sol	ld, or docs (the issuer i	ntend to so	ell to non-a	ceredited	investors i	n this offer	ino ^o		Yes - []	No ⊠
					n Appendix				_		· ·	
2. What	is the minir	num investi			• •		-				. <u>\$_23</u> 7	7,000.00
_											Yes	No
		permit joir			_							丞
commi If a per or state	ission or sin rson to be li es, list the n	ation requestilar remund sted is an asted is a subject to a subject is a subject to a subject is a subject to a subject is a subject is a subject to a subject is a subject to a subject is a subject is a subject to a subject to a subject is a subject to a subject to a subject is a subject to a su	cration for: sociated pe proker or d	solicitation erson or ag caler. If m	n of purchas ent of a brok ore than fiv	ers in conn ker or deald e (5) perso	ection with or registere ns to be lis	sales of sed d with the S ted are asso	curities in t SEC and/or	he offering with a stat	;. c	
Full Name Paradiom	(Last name Capital U.S		lividual)									
Business or			Vumber an	d Street, C	ity, State, 2	Zip Code)						
95 Wellingt					•	•	a					
Name of A	ssociated B	roker or De	aler									
States in W	hich Person	n Listed Ha	s Solicited	or Intend	s to Solicit	Purchasers	<u> </u>					
		s" or check					•	••••••	***********		. 🗆 🗚	l States
AL	AK	AZ	(AR)	C/A	CO	O T	DE	DC	FL	GA	HI	ומו
	IN	(IA)	(KS)	KY	LA	ME	MD	MA	MI	MN	MS	MO
MT	NE	NV	NH	ĺИ	NM	NY	NC	ND	OH	OK.	OR	PA
RI	SC	SD	[TN]	[TX]	UT	VT	VA	WA	[WV]	WI	WY	PR
Full Name	(Last name	first, if ind	ividual)				<u></u>					
Business o	r Residence	Address (Number an	d Street, C	City, State,	Zip Code)		•				
Name of As			_1									
Name of As	sociated B	roker or De	aicr									
States in W	hich Persor	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers						
(Check	"All State	s" or check	individual	States)		·····			**********	***********	AI	l States
AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	[ID]
IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
MT	NE	NV	NH	NJ	NM	NY	NC	ND	ОН	OK	OR	PA
RI	SC)	SD	[TN]	TX]	ŪT	VT	VA	ŴA	[WV]	<u>wi</u>	WY	PR
Full Name (Last name	first, if ind	ividual)		· · · · · ·							
Business or	Residence	Address (1	Number an	d Street, C	ity, State,	Zip Code)			, · · · · · · · · · · · · · · · · · · ·			
Name of As	sociated Br	oker or De	aler							<u></u>		
States in Wi	nich Person	Listed Has	Solicited	or Intends	to Solicit I	Purchasers					, <u>.</u>	···
		" or check							,	••••••	☐ Al	l States
AL	AK	AZ	AR	CA	CO	CT	DE	[DC]	FL	GÄ	ĤI	[ID]
IL	[N]	[IA]	(KS)	KY	<u>LA</u>	ME	MD	MA	MI	MN	MS	MO
MT	NE	NV	NH	NJ	NM	NY	NC	(ND)	OH	OK	OR	PA
RI	SC	SD	TN	TX	<u>ŪT</u>	VT	VA	WA	$\overline{\mathbf{w}}\overline{\mathbf{v}}$	WI	$\overline{\mathbf{W}}\mathbf{Y}$	PR

ι.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	5	s
	Equity	S	s 1,147,459.00
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	<u> </u>	s
	Partnership Interests	S	<u>\$</u>
	Other (Specify)		
	Total		
	Answer also in Appendix, Column 3, if filing under ULOE.	·	
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		A
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors		\$_1,147,459.00
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505	•	
	Regulation A		\$
	Rule 504		\$
			\$ 0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		<u> </u>
	Transfer Agent's Fees		s
	Printing and Engraving Costs		s
	Legal Fees		\$ 7,500.00
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		\$ 68,845.00
	Other Expenses (identify)	_	\$ 450.00
	Tatal		• 76.795.00

CFOFFERING PRICE NUMBER OF DEVENOES TEXTENSES AND USE OF BROOFF DEVE

	and total expenses furnished in response to Part C -	ering price given in response to Part C — Question 1 — Question 4.a. This difference is the "adjusted gross		\$
5.	each of the purposes shown. If the amount for a	roceed to the issuer used or proposed to be used for ny purpose is not known, furnish an estimate and of the payments listed must equal the adjusted gross rt C — Question 4.b above.		
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees] s _	. 🗆 \$
	Purchase of real estate]\$. 🗆 \$
	Purchase, rental or leasing and installation of ma	chinery		
				
		cilities]\$. 📙 \$
	Acquisition of other businesses (including the va offering that may be used in exchange for the ass	lue of securities involved in this sets or securities of another	7.5	П\$
			-	_
	Other (specify):] \$. 🗆 \$
		[]\$	
	Column Totals	[
	Total Payments Listed (column totals added)		_ s_ <u>_1</u> ,	070,664.00
		A OF THE PARTY OF		
sigi	issuer has duly caused this notice to be signed by the ature constitutes an undertaking by the issuer to fu	e undersigned duly authorized person. If this notice rnish to the U.S. Securities and Exchange Commiss credited investor pursuant to paragraph (b)(2) of R	is filed under Rusion, upon writte	tle 505, the following on request of its staff,
Issu	er (Print or Type)	Signature / /	ate	
Ad	ex Mining Inc.	Alama :	June 14,	2007
Nar	ne of Signer (Print or Type)	Title of Signer (Print or Type)	<u> </u>	
Vah	r Ahmed	President		

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

E STATESIONATURE		
Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No E €

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date
Adex Mining Inc.	Allend	1em 14,2007
Name (Print or Type)	Title (Print or Type)	July 1
Kabir Ahmed	President	

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

					PENDIX :				
l	Intend to non-a investor	to sell accredited is in State	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)					ification ate ULOE attach ation of granted)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									1
AK									
AZ									
AR									
CA		×	Common Stock	1	\$910,431.00	0	\$0.00		×
со									
СТ		x	Common Stock	1	\$237,028.00	0	\$0.00		×
DE								<u> </u>	
DC									,;
FL									
GA									
ні									
ID	And differ tops through to be the state of t								
IL									
IN									
IA									
KS									
KY									
LA			·						
ME									
MD									
MA									
мі									
MN									
MS									

				O CAPP	ENDÍX:				
1	Intend to non-a investor	to sell accredited in State (-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	4 Type of investor and amount purchased in State (Part C-Item 2)					ification te ULOE attach ttion of granted) Item 1)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
МО									
МТ									
NE									
NV									
NH									
IJ									
NM									
NY									
NC									
ND									
ОН									
ок									
OR									
PA									
RI									
sc									
SD									
TN									
TX									
UT									
VT									
VA									
WA									
wv									
WI									

1	Intend to sell to non-accredited investors in State (Part B-Item 1)		3	4				5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
			Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)					
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
WY							•		
PR									

END